### **CERTIFICATION FOR INDIRECT COST RATE**

For FY 2003-2004

Legal Entity #	School Dist. #	School Name		County	Level		
0883	1	Choteau Elem		50	EL		
Proposed Restricte	d Indirect Cost Rate <sub>-</sub>	% (Ro	und to nearest hundr	edth (X.XX%) of	a percent.)		
	mplete and submit with submitted for the elem al of your rate.						
This is to certify that I have reviewed the indirect cost rate proposal submitted herewith and to the best of my knowledge and belief:							
allowable in accordan A-87, "Cost Principles	in this proposal to esta ce with the requiremer for State and Local G he attached Predeterm	nts of the Federal awa overnments." Unallov	rd(s) to which they wable costs have be	apply and OME en adjusted in	3 Circular		
(2) All costs included in the proposal are properly allocable to Federal awards on the basis of a beneficial or casual relationship between the expenses incurred and the agreements to which they are allocated in accordance with applicable requirements. Further, the same costs that have been treated as indirect costs have not been claimed as direct costs. In addition, similar types of costs have been accounted for consistently and the Office of Public Instruction will be notified of any accounting changes that would affect the predetermined rate.							
	going is true and corre						
Signature of District	Superintendent or B	oard Chairperson	Street Address o	r P.O. Box			
			PO Box 857				
Printed Name of Aut	horized Official		City	Zip	Code		
			Choteau	594	422		
Title			Date				
Send comp	leted form to: School Accounting ar Office of Public Instru PO Box 202501 Helena, MT 59620-2	ction					
ACCEPTED AND APPROVED FOR THE SUPERINTENDENT OF PUBLIC INSTRUCTION BY:							
Арр	proved Rate for FY20	04	Date Approved				
			Signature				

### **CERTIFICATION FOR INDIRECT COST RATE**

For FY 2003-2004

Legal Entity #	School Dist. #	School Name		County	Level	
0884	1	Choteau H S		50	HS	
Proposed Restricte	d Indirect Cost Rate _	% (Ro	ound to nearest hundr	edth (X.XX%) o	f a percent.)	
application should be	NSTRUCTIONS: Complete and submit with one copy of each application for Indirect Cost Rate. A separate application should be submitted for the elementary and high school district. A copy of this certification will be returned upon approval of your rate.					
This is to certify that I knowledge and belief:	have reviewed the indi	irect cost rate proposa	al submitted herewit	th and to the b	est of my	
allowable in accordan A-87, "Cost Principles	in this proposal to esta ce with the requiremen for State and Local Go he attached Predeterm	its of the Federal awa overnments." Unallov	rd(s) to which they vable costs have be	apply and OMl en adjusted in	B Circular	
(2) All costs included in the proposal are properly allocable to Federal awards on the basis of a beneficial or casual relationship between the expenses incurred and the agreements to which they are allocated in accordance with applicable requirements. Further, the same costs that have been treated as indirect costs have not been claimed as direct costs. In addition, similar types of costs have been accounted for consistently and the Office of Public Instruction will be notified of any accounting changes that would affect the predetermined rate.						
	going is true and correc					
Signature of District	Superintendent or B	oard Chairperson	Street Address o	r P.O. Box		
			PO Box 857			
Printed Name of Aut	horized Official		City	Zip	Code	
			Choteau	59	422	
Title			Date	·		
Send completed form to: School Accounting and Budgeting Office of Public Instruction PO Box 202501 Helena, MT 59620-2501						
ACCEPTED AND APPROVED FOR THE SUPERINTENDENT OF PUBLIC INSTRUCTION BY:						
Approved Rate for FY2004			Date Approved			
			Signature			

### **CERTIFICATION FOR INDIRECT COST RATE**

For FY 2003-2004

Legal Entity #	School Dist. #	School Name		County	Level	
0889	12	Bynum Elem		50	EL	
Proposed Restricte	d Indirect Cost Rate _	% (Ro	und to nearest hundr	edth (X.XX%) o	f a percent.)	
application should be	NSTRUCTIONS: Complete and submit with one copy of each application for Indirect Cost Rate. A separate application should be submitted for the elementary and high school district. A copy of this certification will be eturned upon approval of your rate.					
This is to certify that I knowledge and belief:	have reviewed the indi	rect cost rate proposa	al submitted herewit	th and to the b	est of my	
allowable in accordan A-87, "Cost Principles	in this proposal to estance with the requirements for State and Local Golhe attached Predeterm	its of the Federal awa overnments." Unallov	rd(s) to which they wable costs have be	apply and OMleen adjusted in	B Circular	
(2) All costs included in the proposal are properly allocable to Federal awards on the basis of a beneficial or casual relationship between the expenses incurred and the agreements to which they are allocated in accordance with applicable requirements. Further, the same costs that have been treated as indirect costs have not been claimed as direct costs. In addition, similar types of costs have been accounted for consistently and the Office of Public Instruction will be notified of any accounting changes that would affect the predetermined rate.						
	going is true and correc					
Signature of District	Superintendent or B	oard Chairperson	Street Address or P.O. Box			
			PO Box 766			
Printed Name of Aut	horized Official		City	Zip	o Code	
			Bynum	59	419	
Title			Date			
Send completed form to: School Accounting and Budgeting Office of Public Instruction PO Box 202501 Helena, MT 59620-2501						
ACCEPTED AND APPROVED FOR THE SUPERINTENDENT OF PUBLIC INSTRUCTION BY:						
Approved Rate for FY2004			Date Approved			
			Signature			

### **CERTIFICATION FOR INDIRECT COST RATE**

For FY 2003-2004

Legal Entity #	School Dist. #	School Name		County	Level	
0890	21	Fairfield Elem		50	EL	
Proposed Restricte	d Indirect Cost Rate _	% (Ro	ound to nearest hundr	edth (X.XX%) of	a percent.)	
application should be	INSTRUCTIONS: Complete and submit with one copy of each application for Indirect Cost Rate. A separate application should be submitted for the elementary and high school district. A copy of this certification will be returned upon approval of your rate.					
This is to certify that I knowledge and belief:	have reviewed the indi	irect cost rate proposa	al submitted herewit	th and to the be	est of my	
allowable in accordan A-87, "Cost Principles	in this proposal to estance with the requirements for State and Local Golhe attached Predeterm	its of the Federal awa overnments." Unallov	rd(s) to which they wable costs have be	apply and OME en adjusted in	3 Circular	
(2) All costs included in the proposal are properly allocable to Federal awards on the basis of a beneficial or casual relationship between the expenses incurred and the agreements to which they are allocated in accordance with applicable requirements. Further, the same costs that have been treated as indirect costs have not been claimed as direct costs. In addition, similar types of costs have been accounted for consistently and the Office of Public Instruction will be notified of any accounting changes that would affect the predetermined rate.						
	going is true and correc					
Signature of District	Superintendent or B	oard Chairperson	Street Address o	r P.O. Box		
			Box 399			
Printed Name of Aut	horized Official		City	Zip	Code	
			Fairfield	594	436	
Title			Date			
Send completed form to: School Accounting and Budgeting Office of Public Instruction PO Box 202501 Helena, MT 59620-2501						
ACCEPTED AND APPROVED FOR THE SUPERINTENDENT OF PUBLIC INSTRUCTION BY:						
Approved Rate for FY2004			Date Approved			
			Signature			

### **CERTIFICATION FOR INDIRECT COST RATE**

For FY 2003-2004

Legal Entity #	School Dist. #	School Name		County	Level	
0891	21	Fairfield H S		50	HS	
Proposed Restricte	d Indirect Cost Rate _	% (Ro	und to nearest hundr	edth (X.XX%) of	f a percent.)	
application should be	NSTRUCTIONS: Complete and submit with one copy of each application for Indirect Cost Rate. A separate application should be submitted for the elementary and high school district. A copy of this certification will be returned upon approval of your rate.					
This is to certify that I knowledge and belief:	have reviewed the ind	irect cost rate proposa	al submitted herewit	th and to the be	est of my	
allowable in accordant A-87, "Cost Principles	in this proposal to estance with the requirements for State and Local Golhe attached Predeterm	its of the Federal awa overnments." Unallow	rd(s) to which they vable costs have be	apply and OMI en adjusted in	3 Circular	
(2) All costs included in the proposal are properly allocable to Federal awards on the basis of a beneficial or casual relationship between the expenses incurred and the agreements to which they are allocated in accordance with applicable requirements. Further, the same costs that have been treated as indirect costs have not been claimed as direct costs. In addition, similar types of costs have been accounted for consistently and the Office of Public Instruction will be notified of any accounting changes that would affect the predetermined rate.						
	going is true and corre					
Signature of District	Superintendent or B	oard Chairperson	Street Address o	r P.O. Box		
			Box 399			
Printed Name of Aut	horized Official		City	Zip	Code	
			Fairfield	594	436	
Title			Date			
Send completed form to: School Accounting and Budgeting Office of Public Instruction PO Box 202501 Helena, MT 59620-2501						
ACCEPTED AND APPROVED FOR THE SUPERINTENDENT OF PUBLIC INSTRUCTION BY:						
Арр	proved Rate for FY20	04	Date Approved			
			Signature			

### **CERTIFICATION FOR INDIRECT COST RATE**

For FY 2003-2004

Legal Entity #	School Dist. #	School Name		County	Level		
0893	28	Dutton K-12 Schools	S	50	K12		
Proposed Restricte	d Indirect Cost Rate	% (Ro	und to nearest hundr	edth (X.XX%) of	a percent.)		
NSTRUCTIONS: Complete and submit with one copy of each application for Indirect Cost Rate. A separate pplication should be submitted for the elementary and high school district. A copy of this certification will be eturned upon approval of your rate.							
This is to certify that I have reviewed the indirect cost rate proposal submitted herewith and to the best of my knowledge and belief:							
allowable in accordan A-87, "Cost Principles	in this proposal to estance with the requirements for State and Local Gornel attached Predeterm	nts of the Federal awa overnments." Unallov	rd(s) to which they wable costs have be	apply and OME en adjusted in	3 Circular		
(2) All costs included in the proposal are properly allocable to Federal awards on the basis of a beneficial or casual relationship between the expenses incurred and the agreements to which they are allocated in accordance with applicable requirements. Further, the same costs that have been treated as indirect costs have not been claimed as direct costs. In addition, similar types of costs have been accounted for consistently and the Office of Public Instruction will be notified of any accounting changes that would affect the predetermined rate.							
	going is true and corre						
Signature of District	Superintendent or B	oard Chairperson	Street Address o	r P.O. Box			
			101 2nd St NE				
Printed Name of Aut	thorized Official		City	Zip	Code		
			Dutton	594	4339670		
Title			Date				
Send comp	leted form to: School Accounting ar Office of Public Instru PO Box 202501 Helena, MT 59620-2	ction					
ACCEPTED A	AND APPROVED FOR	THE SUPERINTEND	ENT OF PUBLIC II	NSTRUCTION	BY:		
Ар	proved Rate for FY20	04	Date Approved				
			Signature				

### **CERTIFICATION FOR INDIRECT COST RATE**

For FY 2003-2004

Legal Entity #	School Dist. #	School Name		County	Level		
0894	30	Power Elem		50	EL		
Proposed Restricte	d Indirect Cost Rate	% (Ro	und to nearest hundr	edth (X.XX%) of	a percent.)		
	omplete and submit with submitted for the elemeral of your rate.						
This is to certify that I have reviewed the indirect cost rate proposal submitted herewith and to the best of my knowledge and belief:							
allowable in accordan A-87, "Cost Principles	in this proposal to estance with the requirements for State and Local Gother attached Predeterm	nts of the Federal awa overnments." Unallov	rd(s) to which they a vable costs have be	apply and OME en adjusted in	3 Circular		
(2) All costs included in the proposal are properly allocable to Federal awards on the basis of a beneficial or casual relationship between the expenses incurred and the agreements to which they are allocated in accordance with applicable requirements. Further, the same costs that have been treated as indirect costs have not been claimed as direct costs. In addition, similar types of costs have been accounted for consistently and the Office of Public Instruction will be notified of any accounting changes that would affect the predetermined rate.							
	going is true and corre						
Signature of District	Superintendent or B	oard Chairperson	Street Address o	r P.O. Box			
			PO Box 155				
Printed Name of Aut	thorized Official		City	Zip	Code		
			Power	594	168		
Title			Date				
Send completed form to: School Accounting and Budgeting Office of Public Instruction PO Box 202501 Helena, MT 59620-2501							
ACCEPTED A	AND APPROVED FOR	THE SUPERINTEND	ENT OF PUBLIC II	NSTRUCTION	BY:		
Арј	proved Rate for FY20	04	Date Approved				
			Signature				

### **CERTIFICATION FOR INDIRECT COST RATE**

For FY 2003-2004

Legal Entity #	School Dist. #	School Name		County	Level	
0895	30	Power H S		50	HS	
Proposed Restricte	d Indirect Cost Rate _	% (Ro	und to nearest hundr	edth (X.XX%) of	a percent.)	
INSTRUCTIONS: Complete and submit with one copy of each application for Indirect Cost Rate. A separate application should be submitted for the elementary and high school district. A copy of this certification will be returned upon approval of your rate.						
This is to certify that I knowledge and belief:	have reviewed the ind	irect cost rate proposa	al submitted herewit	th and to the be	est of my	
(1) All costs included in this proposal to establish the final indirect cost rate for the periods indicated above are allowable in accordance with the requirements of the Federal award(s) to which they apply and OMB Circular A-87, "Cost Principles for State and Local Governments." Unallowable costs have been adjusted in allocating costs as indicated in the attached Predetermined Indirect Cost Allocation - Schedule A.						
(2) All costs included in the proposal are properly allocable to Federal awards on the basis of a beneficial or casual relationship between the expenses incurred and the agreements to which they are allocated in accordance with applicable requirements. Further, the same costs that have been treated as indirect costs have not been claimed as direct costs. In addition, similar types of costs have been accounted for consistently and the Office of Public Instruction will be notified of any accounting changes that would affect the predetermined rate.						
	going is true and corre					
Signature of District	Superintendent or B	oard Chairperson	Street Address or P.O. Box			
Printed Name of Aut	horized Official		PO Box 155 City Zip Code			
Timed Name of Add	onzea omeiai		Power	_	468	
Title			Date	00	100	
Send completed form to: School Accounting and Budgeting Office of Public Instruction PO Box 202501 Helena, MT 59620-2501						
ACCEPTED AND APPROVED FOR THE SUPERINTENDENT OF PUBLIC INSTRUCTION BY:						
Арр	proved Rate for FY20	04	Date Approved			
			Signature			

### **CERTIFICATION FOR INDIRECT COST RATE**

For FY 2003-2004

Legal Entity #	School Dist. #	School Name		County	Level		
0896	45	Golden Ridge Elem		50	EL		
Proposed Restricte	d Indirect Cost Rate	% (Ro	und to nearest hundr	edth (X.XX%) of	a percent.)		
NSTRUCTIONS: Complete and submit with one copy of each application for Indirect Cost Rate. A separate application should be submitted for the elementary and high school district. A copy of this certification will be eturned upon approval of your rate.							
This is to certify that I have reviewed the indirect cost rate proposal submitted herewith and to the best of my knowledge and belief:							
allowable in accordan A-87, "Cost Principles	in this proposal to estance with the requiremers for State and Local Goreal entracted by the attached Predeterm	nts of the Federal awa overnments." Unallov	rd(s) to which they vable costs have be	apply and OME en adjusted in	3 Circular		
(2) All costs included in the proposal are properly allocable to Federal awards on the basis of a beneficial or casual relationship between the expenses incurred and the agreements to which they are allocated in accordance with applicable requirements. Further, the same costs that have been treated as indirect costs have not been claimed as direct costs. In addition, similar types of costs have been accounted for consistently and the Office of Public Instruction will be notified of any accounting changes that would affect the predetermined rate.							
	going is true and corre						
Signature of District	Superintendent or B	oard Chairperson	Street Address o	r P.O. Box			
			1130 3rd Rd SW				
Printed Name of Aut	thorized Official		City	Zip	Code		
			Fairfield	594	436		
Title			Date				
Send comp	leted form to: School Accounting ar Office of Public Instru PO Box 202501 Helena, MT 59620-2	ction					
ACCEPTED A	AND APPROVED FOR	THE SUPERINTEND	ENT OF PUBLIC II	NSTRUCTION	BY:		
Approved Rate for FY2004			Date Approved				
			Signature				

### **CERTIFICATION FOR INDIRECT COST RATE**

For FY 2003-2004

Legal Entity #	School Dist. #	School Name		County	Level	
0898	61	Pendroy Elem		50	EL	
Proposed Restricte	d Indirect Cost Rate <sub>-</sub>	% (Ro	ound to nearest hundr	edth (X.XX%) of	a percent.)	
INSTRUCTIONS: Complete and submit with one copy of each application for Indirect Cost Rate. A separate application should be submitted for the elementary and high school district. A copy of this certification will be returned upon approval of your rate.						
This is to certify that I knowledge and belief:	have reviewed the ind	irect cost rate proposa	al submitted herewit	th and to the be	est of my	
(1) All costs included in this proposal to establish the final indirect cost rate for the periods indicated above are allowable in accordance with the requirements of the Federal award(s) to which they apply and OMB Circular A-87, "Cost Principles for State and Local Governments." Unallowable costs have been adjusted in allocating costs as indicated in the attached Predetermined Indirect Cost Allocation - Schedule A.						
(2) All costs included in the proposal are properly allocable to Federal awards on the basis of a beneficial or casual relationship between the expenses incurred and the agreements to which they are allocated in accordance with applicable requirements. Further, the same costs that have been treated as indirect costs have not been claimed as direct costs. In addition, similar types of costs have been accounted for consistently and the Office of Public Instruction will be notified of any accounting changes that would affect the predetermined rate.						
	going is true and corre					
Signature of District	Superintendent or B	oard Chairperson	Street Address or P.O. Box			
Printed Name of Aut	horized Official		PO Box 65 City Zip Code			
Fillited Name of Aut	Honzed Official		-	_		
Title			Pendroy <b>Date</b>	594	467	
Send completed form to: School Accounting and Budgeting Office of Public Instruction PO Box 202501 Helena, MT 59620-2501						
ACCEPTED AND APPROVED FOR THE SUPERINTENDENT OF PUBLIC INSTRUCTION BY:						
Ар	proved Rate for FY20	04	Date Approved			
			Signature			

### **CERTIFICATION FOR INDIRECT COST RATE**

For FY 2003-2004

Legal Entity #	School Dist. #	School Name		County	Level	
0900	75	Greenfield Elem		50	EL	
Proposed Restricte	d Indirect Cost Rate _	% (Ro	ound to nearest hundr	edth (X.XX%) o	f a percent.)	
application should be	NSTRUCTIONS: Complete and submit with one copy of each application for Indirect Cost Rate. A separate application should be submitted for the elementary and high school district. A copy of this certification will be returned upon approval of your rate.					
This is to certify that I knowledge and belief:	have reviewed the ind	irect cost rate proposa	al submitted herewit	th and to the b	est of my	
allowable in accordan A-87, "Cost Principles	in this proposal to estance with the requirements for State and Local Golhe attached Predeterm	its of the Federal awa overnments." Unallov	rd(s) to which they vable costs have be	apply and OMleen adjusted in	B Circular	
(2) All costs included in the proposal are properly allocable to Federal awards on the basis of a beneficial or casual relationship between the expenses incurred and the agreements to which they are allocated in accordance with applicable requirements. Further, the same costs that have been treated as indirect costs have not been claimed as direct costs. In addition, similar types of costs have been accounted for consistently and the Office of Public Instruction will be notified of any accounting changes that would affect the predetermined rate.						
	going is true and corre					
Signature of District	Superintendent or B	oard Chairperson	Street Address o	r P.O. Box		
			590 2nd Road NE			
Printed Name of Aut	thorized Official		City	Zı	o Code	
			Fairfield	59	4369214	
Title			Date			
Send completed form to: School Accounting and Budgeting Office of Public Instruction PO Box 202501 Helena, MT 59620-2501						
ACCEPTED AND APPROVED FOR THE SUPERINTENDENT OF PUBLIC INSTRUCTION BY:						
Арі	proved Rate for FY20	04	Date Approved			
			Signature			